

APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

RECEIVED

DEPARTMENT OF ECOLOGY

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.) ☐ Change purpose(s) of use ☐ Add purpose(s) of use ☐ Change point(s) of diversion/withdrawal ☐ Add point(s) of diversion/withdrawal ☐ Change/transfer place of use ☐ Other (i.e. consolidation, intertie, trust water) Explain:		CHANGE No. CG3- OF DATE ACCEPTED 4 1 FEE \$ 50 REC CHECK No. 39580 ECY Coding: 001-002-WF SEPA: A Exempt I	22 1 3 BY KRUF 2 D 3 14 1 3 HO R10285-000011 Not exempt NS
1. Applicant Information: APPLICANT/BUSINESS NAME		PHONE NO.	FAX NO.
		(509)	FAX NO.
Big Dog, LLC (Blaine Hirai)		(000)	
2567 Road k NW			
CITY		STATE	ZIP CODE
Quincy		WA	98848
- Carrier			
CONTACT NAME (IF DIFFERENT FROM ABOVE)		PHONE NO.	FAX NO.
Ed Kemp (H2O4U Consulting)		() 750-1865	()
ADDRESS			
524 N. Bluff West Dr			
CITY		STATE	ZIP CODE
Moses Lake		WA	98823
2. Water Right Information: WATER RIGHT OR CLAIM NUMBER All of QB-1404 (A) (see items 4 & 5 below)	RECORDER Fancher	NAME(S) Land and Investme	ents, LLC
DO YOU OWN THE RIGHT TO BE CHANGED? YES NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS: Fancher La Box 1245, Moses Lake, WA 98837 HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST F Please attach copies of any documentation that dem was established. Also, if you have a water system p	IVE (5) YEAR	S? ⊠ YES □ NO consistent, historical	use of water since the right
application.			
APP. NO PERMIT NO CER			NGE NO

3. Point(s) of Diversion/Withdrawal:

A. Existing	sting
-------------	-------

Well 1 SE NE 13 20 27 161641003	
- 1. [1882] - 4. 2010 - 4. 2014 - 1. 2014 - 1. 2014 - 1. 2014 - 1. 2014 - 1. 2014 - 1. 2014 - 1. 2014 - 1. 2014	

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Three (3) proposed Wells locations tbd in the NWNW, NENW, SWNW, & SENW			nw	28	19	25	151810000	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

PROPOSED:
☐ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME: Existing is Fancher EXISTING: YES NO Land Investments, LLC (Robert R. Fancher)

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Seasonal Irrigation	200.0	70.0	March thru October

R Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Seasonal Irrigation	200.0	70.0	March thru October

5. Place of Use:

20.0 ac	res with	in the SV	V1/4NE1	/4 and N	W1/4SE1/4 of Sec.	13, T.20N., R27E.,W	.M.
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		13	20	27	Grant	161641002 &	20.0

			LEGAL DES	SCRIPTION	OF LANDS WHERE NEW USE	E IS PROPOSED:	
20.0 a	cres with	in portion	ns of the	SW1/4N	IW1/4 Sec. 28, T.19N	N.,R.25E.,W.M.	
						<u> </u>	7)
						A	
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL # D	# OF ACRES

please include a certified copy of the plat map. Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER? ☑ YES ☐ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): See Item 6. below 6. Remarks and Other Relevant Information: I am in the process of purchasing QB-1400, Portion of 1401,1402, 1404(A), & 1405 and will close if individual transfer requests are approved. All of the above mentioned permits will be used for the seasonal irrigation of land I own in the NW1/4 of Section 28, T19N., R25E., W.M. It is my intention to identify the location of the well(s) once they are installed. IF FOR SEASONAL OR TEMPORARY, START DATE 3/1/_____ END DATE 9/31/____ Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. 7. Signatures: I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me. Blanks Hirai 3 1812013 (Water Right Holder) 3 1 2013 Fancher Land Investments, LLC (Land Owner(s) of Existing Place of Use) IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE. WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): ☐ APPLICATION FEE NOT ENCLOSED □ MAP NOT INCLUDED or INCOMPLETE ☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION ___ IS INCOMPLETE □ OTHER/EXPLANATION:_ _____ DATE: ___ / __/

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property,